
From: Will Buividas

Sent: Wednesday, May 20, 2020 11:03 AM

Subject: May 26th work study session

Please consider changing the maximum numbers of players for live poker tables. Hard rock in Florida reopened with 6 players max instead of 4. Also, some casinos in FL are installing plastic dividers / walls to get 6 to 7 people seated safely at the table and reduce the likely of a transmission.

Will Buividas

From: Alan Gruskoff
Sent: Wednesday, May 20, 2020 11:44 AM
Subject: Public Comment Notice #2020-29

"Notice #2020-29: The Nevada Gaming Control Board will take public comment on any matters within its jurisdiction, control, or advisory power. Comments by the public should be emailed to publiccomment@gcb.nv.gov and include the commenter's name."

Hello Nevada Gaming Control Board

I see and hear much action being taken on COVID-19 issues regarding re-opening Casinos and heartily support that effort.

I expect to see all those carefully thought out rules taking effect while Casino smokers are given free reign to spread their foul, cancerous, COVID-19 laden stench to every person around them. Both the workers and patrons.

The Nevada Gaming Control Board must place a No Smoking rule in Casinos implemented at Re-Open time when the change will cause the least disruption.

As to the phony "We will lose all our business if we dont allow players smoking" ruse: Easy. See California. They have Casinos and No Smoking has not put the Casinos out of business as everyone knows you cant smoke inside public buildings in California. Life just goes on just fine without the Drug Addicts stinking up the joint.

Best regards,

Alan Gruskoff
Las Vegas, NV
(702) 972-1086

From: beth bozarth
Sent: Thursday, May 21, 2020 10:08 AM
Subject: Safety concern for reopening casinos

Please consider the concern below...

> Something that seems to have been overlooked is protecting workers that are face to face, behind short counters completing transactions that take a few minutes with the guest. ie: casino cage, rewards center/players club, live keno, race and sports book There is no barrier between the workers and the unmasked guest. Yes workers will be in masks, but that does not stop the guest from spreading germs while they speak, cough and/or sneeze during the transaction.

Thank you so very much in an advance for your consideration, Beth Bozarth Sent from my iPad

From: cindy kent
Sent: Thursday, May 21, 2020 4:21 PM
Subject: casino opening date

Hello,

My husband and travel from Texas on an airplane every year to come to Las Vegas. I made reservations 5 months ago through a package deal with Expedia for an arrival date of May 31-June 2. I really wish you could give an indication in the next few days whether your board and the governor will be allowing casinos to open and operate by May 31. I cannot wait until the last minute to try and reschedule this vacation otherwise I lose all of my hard earned money that I have already paid for this vacation. As like many people worldwide, we have to schedule vacations according to our work schedule and take vacation days. I do not purchase travel insurance as I feel I do not need to pay the extra money because this has never been an issue in the past. I am sure there are many other people in my shoes waiting and waiting for the reopen date. I am sure the casino workers are ready to get back to work also.

Anxiously waiting for your response,

Cindy Kent

From: Barb Whitesell
Sent: Saturday, May 23, 2020 12:22 AM
Subject: Regarding face masks

Good Morning, I am a resident of Henderson, since 2001. I pretty much fell in love with this city after moving here. I have a great job working in the convention industry since 2002. I am rather worried at this time, about the future in the convention industry. But that's a whole different matter and not the reason I am writing to you today.

I dont think it is fair for our governor to push wearing face masks . And I am hoping that most casinos will give their customers the option of wearing them and not force the people into wearing one. Governor Sisolak has no idea about the danger that these face masks can cause a person by wearing them all day long. Especially for the elderly. The loss of oxygen to these older folks can be very detrimental to their health. If not fatal.

Also, people need to mingle with flora and bacteria in our everyday lives. It helps to keep everyone's immune system strong, so we can fight off these infections. People that have been working, and who are forced to wear these face masks all day long at their jobs and who have been wearing them for months now and also, so has a good majority of people who are out shopping, or walking and even wearing them while they drive in their cars. And I'm here to tell you how extremely unhealthy this all is. Everyone who wears a face mask is causing their immune system to become very low and it will continue to lower. Until the day they finally take them off for good, and we will probably see 50% of them, will be accessible to all kinds of sicknesses. People forget that doctors wear face masks in a sterile environment and they only wear them for a few hours a day. These doctors know the dangers that these face masks are causing the public, in terms of their health. Not everyone lives in fear.

This is will turn out dangerous if wearing face masks continues for very long. People can stay home if they are that worried. Forcing people to cover up their breathing and to keep them from living their lives like people always do, is wrong.

Please, I ask you all to think about the dangers of wearing face masks.

Thank you for your time.

Sincerely,
Barbara Whitesel

From: Barbara Whitesell
Sent: Monday, May 25, 2020 2:23 PM
Subject: The dangers of face masks

Virologist [Dr. Judy Mikovits, PhD](#) offered a science-based warning about wearing face masks:

“The masks on walks outside and while driving in your car is mind blowing to me. Do you not know how unhealthy it is to keep inhaling your carbon dioxide and restricting proper oxygen flow? I honestly cannot believe how non-logical we have become! We as a society seem to just listen to (perceived) authority without question. I don’t see a whole lot of critical thought happening here, I’m sorry to say. Why I opt NOT to wear a mask. Well, let me break it down for you. The body requires AMPLE amounts of oxygen for optimal immune health. Especially during a so-called ‘pandemic’. Proper oxygenation of your cells and blood is ESSENTIAL for the body to function as it needs to in order to fight off any illness.”

“Masks will hamper oxygen intake. Unless you are working in a hospital setting, it is NOT necessary. But go ahead and hold onto to your security blanket if it makes you feel better. I do not listen to the government when it tries to instruct me on how to maintain health, nor do I trust their ‘stats’ (which we know are based on unconfirmed numbers).”

“You want to be healthy, then make sure to apply it to all aspects of your life. Stop smoking, change your diet, stop consuming alcohol, turn off your wifi and cell phone, stop getting injected with neurotoxins, stop taking toxic medications, stop using so many chemicals in your everyday life, practice proper hygiene (WASH YOUR HANDS). Most importantly, go outside and BREATHE DEEPLY, get some sun, drink plenty of (filtered) water, sleep well and learn to LISTEN to your body.”

In addition to Dr. Mikovits warning, there are additional problems with wearing a face mask that increase stress on the immune system.

Stress Can Lower Your Immunity

Cortisol is closely linked with stress

A face-covering or mask that interferes with respiration can add to stress.

Cortisol is a hormone closely linked with stress. It works as a key player in the body’s stress response and is often measured in research as an indicator of stress.

Cortisol plays a vital role in the body’s functioning; it’s secreted by the kidney’s adrenal glands. But high and sustained blood levels of cortisone in individuals stressed by the fear of Covid-19 can trigger serious and emergent health issues.

Higher and more [prolonged levels of cortisol](#) in the bloodstream (such as those associated with chronic stress) have been shown to have negative effects, such as:

- **Impaired cognitive performance**
- Suppressed thyroid function
- Blood sugar imbalances such as hyperglycemia

- Decreased bone density
- Decrease in muscle tissue
- **Higher blood pressure**
- **Lowered immunity** and inflammatory responses in the body, slowed wound healing, and other health consequences
- Increased abdominal fat, which is associated with a greater amount of health problems than fat deposited in other areas of the body. Some of the health problems associated with increased stomach fat are **heart attacks, strokes**, developing metabolic syndrome, higher levels of “bad” cholesterol (LDL) and lower levels of “good” cholesterol (HDL), which can lead to other health problems.

Offering a face mask “waiver” to shoppers “diagnosed” with COPD, asthma, or related pulmonary diseases misses the point since any healthy person who wears a face mask can become immune compromised by the additional stress that attempting to breathe through a mask can place on the individual.

A face mask or facial covering can displace oxygen to the lungs and increase the levels of carbon dioxide intake when exhaled air – trapped inside the mask – is re-breathed.

More stress is realized when accumulated moisture causes the mask to “clog” the inspiration of air through the mask with increased resistance to inhalation and exhalation. Blocking the passage of air through the mask, even partially, places excessive demands on thoracic muscles and the diaphragm. The result is that breathing becomes more difficult and labored – even among a healthy population. Pushing a shopping cart through a grocery store under these conditions can result in labored respiration.

In certain individuals, especially those suffering from PTSD, mask obstruction can cause claustrophobia, panic attacks, or a feeling of suffocation. These individuals are more prone to blood pressure spikes, heart attacks, and stroke. All of these factors combined can compromise those with otherwise-normal immune systems.

Covid-19 is a time when the public is encouraged to maintain high immunity and healthy habits in order to avoid a serious respiratory illness. But elected officials unwilling to defer critical health policy decisions to experts in health care can too easily be seen as arrogant and politically motivated.

Sweden has already proven to the satisfaction of Dr. Michael Ryan at WHO that a lockdown is not necessary to achieve herd immunity while maintaining a low-stress and viable economy.

The concept of flattening the curve was to prevent hospitals from overflowing with patients, but the forecasts for patient load and mortality were wildly high by orders of magnitude.

It’s time to look at Covid-19 more like a seasonal flu outbreak rather than a scary pandemic.

From: Barbara Whitesell
Sent: Monday, May 25, 2020 2:33 PM
Subject: Blaylock: Face Masks Pose Serious Risks To The Healthy

<https://www.technocracy.news/blaylock-face-masks-pose-serious-risks-to-the-healthy/>

From: Barb Whitesell
Sent: Monday, May 25, 2020 10:44 PM
Subject: 3.pdf

A study they did on the dangers of face masks.

Preliminary report on surgical mask induced deoxygenation during major surgery*

A. Beder; *Ü. Büyükkoçak; **H. Sabuncuoğlu; ***Z.A. Keskil and ****S. Keskil

Başkent University. Faculty of Health Sciences. Department of Nursing and Health Services. Ankara, Turkey; *Kirikkale University. Faculty of Medicine. Departments of Anaesthesiology and Pharmacology***. Kirikkale. Turkey. **Ufuk University, Faculty of Medicine, Department of Neurosurgery. Ankara, Turkey. ****Bayindir Medical Center, Department of Neurosurgery. Ankara. Turkey.

Summary

Objectives. This study was undertaken to evaluate whether the surgeons' oxygen saturation of hemoglobin was affected by the surgical mask or not during major operations.

Methods. Repeated measures, longitudinal and prospective observational study was performed on 53 surgeons using a pulse oximeter pre and postoperatively.

Results. Our study revealed a decrease in the oxygen saturation of arterial pulsations (SpO₂) and a slight increase in pulse rates compared to preoperative values in all surgeon groups. The decrease was more prominent in the surgeons aged over 35.

Conclusions. Considering our findings, pulse rates of the surgeon's increase and SpO₂ decrease after the first hour. This early change in SpO₂ may be either due to the facial mask or the operational stress. Since a very small decrease in saturation at this level, reflects a large decrease in PaO₂, our findings may have a clinical value for the health workers and the surgeons.

KEY WORDS: Surgery. Surgical Mask. Oxygenation. Operation. Oxygen saturation. Facemask.

Comunicación preliminar sobre desoxigenación inducida por la mascarilla quirúrgica durante la cirugía de larga duración

Resumen

Objetivos. Este estudio se realizó para determinar si la saturación de oxígeno del cirujano se afectaba por el uso de la mascarilla, durante intervenciones de larga duración.

Métodos. Se hizo un estudio longitudinal y prospectivo en 53 cirujanos con medidas de la hemoglobina realizadas con un oxímetro para medir la saturación del pulso arterial. Se hicieron estudios antes y

después de la operación.

Resultados. Nuestro estudio puso de manifiesto una disminución de la saturación de oxígeno de las pulsaciones arteriales (SpO₂) y un ligero aumento de las pulsaciones en comparación con el estado preoperatorio en todos los grupos de cirujanos. La disminución era mayor en el grupo de edad superior a los 35 años.

Conclusiones. Según nuestros hallazgos, el ritmo del pulso aumenta y la concentración de SpO₂ disminuye después de la primera hora de la operación. Este cambio temprano de SpO₂ puede deberse a la mascarilla o al estrés de la intervención. Puesto que un ligero descenso en la saturación a este nivel refleja una mayor disminución de la PaO₂, nuestros datos pueden tener un valor clínico para la salud del personal sanitario y para los cirujanos.

PALABRAS CLAVE: Cirugía. Oxigenación. Operación. Saturación de oxígeno. Mascarilla.

Introduction

Soon after the introduction of surgical masks by Mikulicz⁵ in 1897, their usage in the operating theatre became a standard practice. Although there appears to be a shift from a patient-protective standpoint to a healthcare worker-protective standpoint in recent years, it is generally accepted that operating theatre staff has to wear surgical masks and change it partway through long procedures (4 hr or more)⁶.

Surgeons in the operating room frequently experience physical discomfort, fatigue, and possibly even deterioration of surgical judgment and performance. Although considerable information exists about the effects of ambient environment on both mental and physical performance, the final "personal" environment for the surgeon beneath the surgical mask is often very inadequately conditioned

*The work was done in the surgical theaters of Kirikkale University, Faculty of Medicine and Fatih University, Faculty of Medicine

despite the universal air-conditioning standard of operating theaters. Thus they either wear masks improperly or refrain from using them altogether. As it is known that heat and moisture trapping occur beneath surgical masks, it seems reasonable that some of the exhaled CO₂ may also be trapped beneath them, inducing a decrease in blood oxygenation.

“Normal blood O₂ saturation” is usually defined as a fractional saturation of 90 to 97.5%, which corresponds to an arterial oxygen partial pressure of 13.3 to 13.7 kPa, if there are no other hemoglobin species, apart from oxygenated and reduced hemoglobin. A pulse oximeter can detect the oxygen saturation of hemoglobin quickly, in an accurate, and reliable way. Pulse oximeters combine oximetry and plethysmography to measure arterial oxygen saturation, noninvasively. According to Lambert Beer Law, oxygenated and reduced hemoglobin absorb red and infrared light differently. Oxyhemoglobin absorbs more infrared light, while reduced hemoglobin absorbs more red light. The ratio of absorptions at the red and infrared wavelengths is analyzed by oximetry to give the oxygen saturation of arterial pulsations⁴.

The primary focus of this study was to measure the surgeons' oxygenation status while they were engaged in their daily routine activities of major operations.

Materials and methods

53 surgeons from both sexes, employed at university hospitals, 24 to 54 years old, non-smokers and without any chronic lung disease were studied by pulse oximetry before and after the course of an operation. They were hemodynamically stable, breathing room air and standing throughout the operations.

The groups were formed according to the duration of the operations:

- I. Duration of the operations was up to 60 minutes,
 - Ia: group wearing mask (n=5)
 - Ib: group of surgeons who did not wear mask during primary care operations with duration of less than 30 minutes (n=9)
- II. Duration of the operations was in between 60-120 minutes (n=25).
- III. Duration of the operations was in between 120-180 minutes (n=23).
- IV. Duration of the operations was in between 180-240 minutes (n=20).

In order to estimate whether age has any effect on oxygen saturation of hemoglobin and pulse rate, surgeons were also divided into two age groups according to the median age: Surgeons under the age of 35 (n=25) and surgeons over the age of 35 (n=28). The surgeon age could not be used as a covariate in regression analysis due to sparsity

of the data.

Disposable sterile one-way surgical paper masks (Surgical Face Mask SLM/B, Sterilife, Yozgat, Turkey) were used and the mask position did not vary during the procedures (never below the nose). The same pulse oximeter with a reusable clip type finger probe (Cardiocap/5, Datex-Ohmeda, Helsinki, Finland) was used to measure the blood O₂ saturation during the study. Participants were encouraged to speak and behave in their usual manner throughout the operation. To eliminate the effect of dehydration over a several hour case on both pulse rate and O₂ saturation, the surgeons were allowed after every hour to drink water through a straw. For all measurements, finger probe was applied to the second finger of the right hand. The study was performed for over a 3-month period extending from March to May, while the operating room ambient temperature varied from 18 to 20°C, and the relative humidity from 35 to 40%.

Just before the operation, oxygen saturation and pulse rate values were recorded. At the end of the operation, pulse oximeter was applied again and the values were recorded. As the sham group, same surgeons were individually reassessed in the following days before and after exactly the same periods (between preoperational and post operational measurements) while they were standing in the operating room with their sterile gowns as an observer, not performing surgery and not wearing masks to obtain the pre control and post control values.

Paired and unpaired Student's t test were employed when comparing two groups such as pre and post operational values. The differences between the groups -more than two- were statistically evaluated using Kruskal-Wallis analysis of variance and than post hoc Dunn's test. Data are expressed as mean ± standard error of mean (S.E.M.). Conditions were considered to be statistically significant when p<0.05.

Results

When the values for oxygen saturation of hemoglobin were compared, there were statistically significant differences only between preoperational and post operational values (Fig. 1). As the duration of the operation increases, oxygen saturation of hemoglobin decreases significantly. Neither preoperational values, nor the post operational values in themselves were different among the groups. In the group of surgeons who did not wear masks during primary care operations with duration of less than 30 minutes, preoperational saturation values were 97.6±0.2 while post operational values decreased to 96.3±0.3 (p=0.0006).

When preoperational and post operational pulse rates were compared, it was observed that pulse rate increased after the operations, and there was a statistically significant

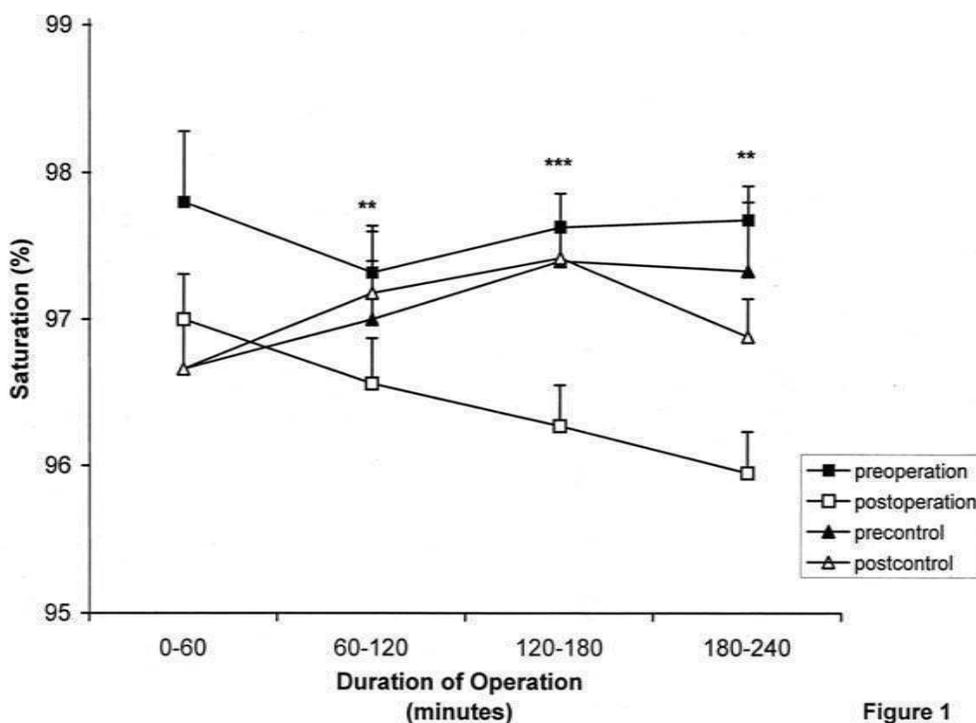


Figure 1

Figure 1. The changes in the oxygen saturation of hemoglobin by the duration of surgical operations. Data are expressed as mean ± S.E.M. of n surgical operations. There were statistically significant differences only between preoperational and postoperational values. ** $p < 0.01$, *** $p < 0.0001$

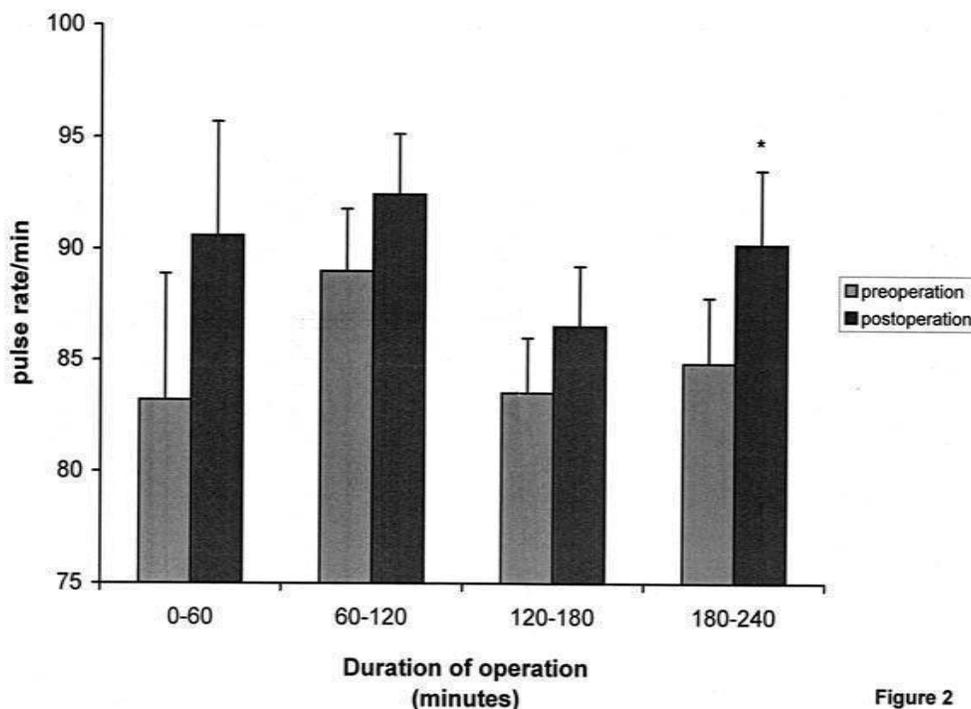


Figure 2

Figure 2: The changes in pulse rates by the duration of surgical operations. Data are expressed as mean ± S.E.M. of n surgical operations. There was a statistically significant difference only in the group in which operation duration was 180-240 minutes. * $p < 0.05$.

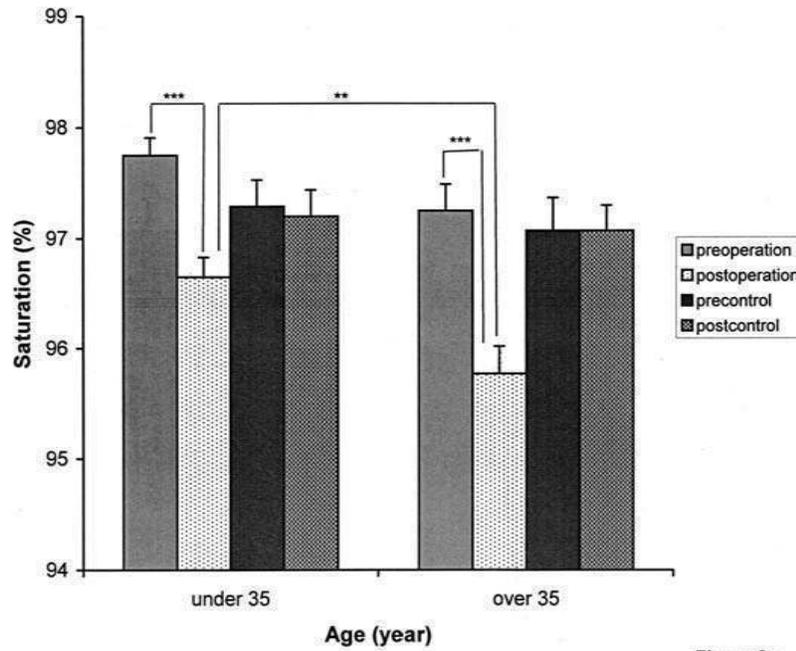


Figure 3a

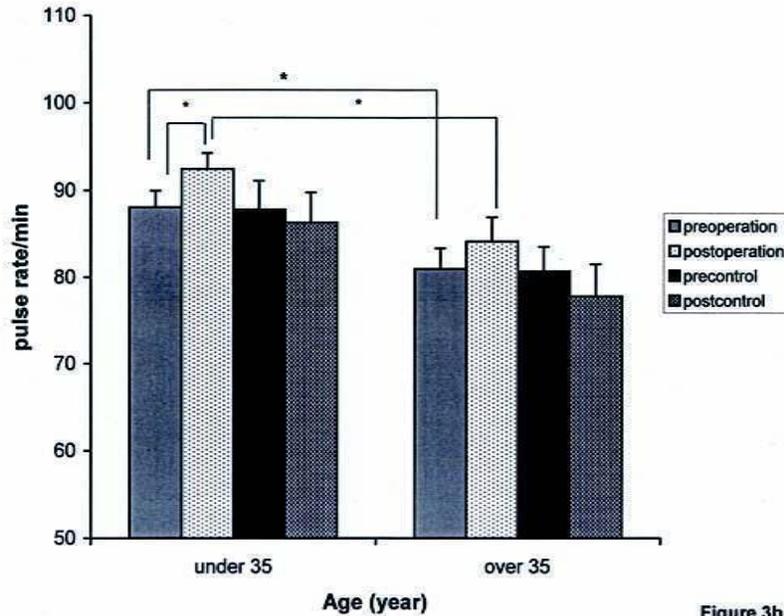


Figure 3b

Figure 3. a: Effect of age on oxygen saturation of hemoglobin. ** $p < 0.01$, *** $p < 0.0001$.
b: Effect of age on pulse rates. * $p < 0.05$.

difference only in the group in which operation duration was 180-240 minutes ($p=0.02$) (Fig. 2). Neither preoperational values, nor post operational values in themselves were different in the groups.

There was not any statistically significant difference between pre control and post control values of pulse rates and oxygen saturations (SpO_2) of the same surgeons, without facial masks while not performing surgery (Fig 1).

Oxygen saturation of hemoglobin decreased significantly after the operations in both age groups ($p < 0.0001$). The post operational decrease was more prominent in surgeons over 35 when compared to the surgeons under 35 ($p=0.0073$) (Fig. 3 a).

It was observed that pulse rate decreases by age. Both preoperational and post operational pulse rates were significantly different between the two age groups ($p=0.0287$

and $p=0.0124$ respectively) (Fig 3 b). Under the age of 35, pulse rate increases significantly after the operations ($p=0.0207$).

Discussion

Although decrease in both mental - physical performance and accuracy may sometimes be overcome by the motivation of the surgeon, increased fatigue is common in lengthy operations. The increased endogenous heat production of the surgeon, as well as many aspects of the operating room situation -even the close environment beneath the surgical mask- may also negatively affect the working condition of the surgeon. Surgical masks may impose some measurable airway resistance, but it seems doubtful if this significantly increases the process of breathing. Although it might have appeared to be likely that hypoxemia results from the increased CO_2 content of the inspired air¹ due to the exhaled CO_2 getting trapped beneath the surgical face mask; there has been no controlled study concerning with the effect of surgical masks on the level of blood oxygenation. In this study we have measured the oxygen saturation of arterial pulsations (SpO_2) by a pulse oximeter and found a statistically significant decrease in the blood O_2 saturation level of the surgeons post operationally, which is not due to prolonged standing or stress.

Pulse oximetry, nowadays considered as a standard of clinical care, is a non-invasive method used to measure arterial oxygen saturation with a clinically acceptable accuracy. Since pulse oximeters cannot be calibrated by the user, their performances had been evaluated under both normal (good perfusion, saturation within a normal range and no interfering substances or extraneous factors) and adverse conditions. Despite some performance limitations in the settings of carboxyhemoglobinemia, motion artifact, presence of intravascular dyes, change in systemic vascular resistance, hypotension, nail polish, vasoconstriction, and anemia^{2,7}, it has been shown that age, gender, weight, body temperature, hemoglobin concentration and pulse pressure have little effect on the accuracy of pulse oximeters in detecting hypoxemia⁸. The majority of pulse oximeters have an absolute mean error of less than 1.0% when compared to in vitro saturation measurements^{3,9}. Pulse oximeters are limited by their software so as not to give a saturation reading greater than 100%, and this limits the potential for positive errors and makes bias and precision calculations difficult to interpret in this high range. As the sigmoid shape of the blood oxygen dissociation curve flattens out at this high saturation levels (>90%) and since even a very small decrease in saturation at this level reflects a large decrease in PaO_2 ; our findings may have a clinical value for the health worker-surgeon: The surgeon's post operational blood O_2 saturation level is decreased

more than 1% although the variability of the saturation sensors is less than 1%. It is thought that after a very short time the barrier function of the surgical face mask is gone⁶. Thus it is hard to believe that these masks serve as a reducer of oxygen uptake, but they may be acting as a psychological restriction over spontaneous breathing of the active surgeon.

Considering our findings, this is the first clinical investigation reporting a decrease in blood O_2 saturation and an increase in pulse rates of the surgeons after the operations due to surgical mask usage. This change in SpO_2 may be either due to the facial mask or the operational stress, since similar changes were observed in the group performing surgery without a mask. However, it cannot be decided whether stress plays any role on the late changes, namely pulse rate increase and SpO_2 level decrease; since surgeons are not allowed to perform major surgery without a facial mask in most institutions. In order to better elucidate the effects of stress, a randomized control study should have been conducted in a more controlled environment with different sorts of workers from different gender who are or are not used to wearing face masks on (such as anesthesiologists, nurses) also working the same durations. Thus, it is important not to generalize the results of this preliminary study, and further studies involving measurement of gas tensions over time, both from blood and from samples obtained under the mask (in order to show a presumed build-up of CO_2 under the mask) have to be carried out to elucidate this issue.

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Corresponding author: Prof. Dr. Semih Keskil, M.D., Ph.D. Fethiye Sokak No: 4/6. Gazi Osman Pasa. 06700 Ankara Turkey.

From: Debbie Ellis
Sent: Saturday, May 23, 2020 11:31 AM
Subject: Casinos Re-opening & Smoking

Hi,

I would like the issue of smoking to be addressed before the casinos reopen. Since second hand smoke makes people more susceptible to respiratory illnesses like COVID19, the casinos should be forced to ban smoking to protect the health of their customers and employees.

If people are required to wear masks, then people can not be allowed to have a cigarette dangling out of their mask. Being exposed to second hand smoke (and the coughing that it causes) will not make for a safe environment for customers or employees to be in.

I personally will never step foot in a casino again if they allow people to continue to smoke while claiming they are doing everything they can to protect people's health.

Please stop them from taking profits over people's health at this crucial time during a respiratory pandemic!!! All casinos must go smoke free in order to reopen safely. They will lose business and lives if they don't.

Sincerely,

Debbie Ellis

From: Len Herstein

Sent: Monday, May 25, 2020 5:43 PM

Subject: Public comment for Nevada Gaming Control Board Covid-19 Informational Workshop to be held May 26, 2020 at 9:00am

Dear Board members,

My name is Len Herstein.

As you refine the policies for safely reopening gaming, I would like to respectfully request that you consider the needs of meeting planners - those who bring so many people and dollars to the state in the form of meetings and conventions.

Specifically, please recognize that the business of planning and executing large meetings and events is heavily reliant on forethought and planning. Many items – such as logistics, travel, agenda planning, food & beverage, audio/visual, and many more - must be arranged and committed to far in advance of the actual event date.

While I understand that the primary focus is to get the casinos open for gaming, please recognize that, without advanced notice of your plans for meetings and events, those who plan and execute such events are being set up for failure.

Without clarity as to the Board's plans in terms of allowing large group meetings in the near future, casino hotels are working as if all meetings will be held. When the meeting date comes, if the hotels are not allowed to hold them, they just cancel them. This creates a difficult position for the planners who are forced to either (a) waste a great deal of money and time planning a meeting that is cancelled at the last minute or (b) proactively cancel the event themselves and be subject to massive cancellation penalties from the hotels.

As such, I respectfully request that the Board make specific recommendations as to what types and sizes of meetings should be proactively cancelled due to the low likelihood they will be allowed by the Board or the Governor in the near future.

For example, if the current thinking is that groups of more than 250 will not be allowed until a vaccine or medication is widely available to treat coronavirus, please make that clear now. Or perhaps you know now that, barring any significant changes, it is not expected that groups of a certain size will be allowed before a certain date. **Any** guidance that can be given for upcoming months would be very helpful. This way, meeting planners can have enough time to properly plan for alternatives that will allow them to salvage revenue from this situation and be in a better position to bring future groups and revenue to Nevada.

You may believe that your previous guidance served this purpose. However, casino hotels are currently interpreting that guidance to mean that things can change at any moment – and so they are refusing to proactively cancel any groups without penalty.

If you do not give more specific guidance, casino hotels will be able to continue to push their clients to the last possible day before cancelling events. This is not fair to planners and will create undo financial hardship.

Thank you.

All the best,

Len Herstein

From: Ken Liu
Sent: Monday, May 25, 2020 7:48 PM
Cc: Bethany Khan
Subject: Public comments for GCB workshop, May 26

Hi,

Please find attached 7 public comments for the GCB workshop on COVID-19 at 9 am tomorrow. Please read them into the record before the workshop in the following order:

1. Geoconda Arguello-Kline
2. Gladis Blanco
3. Katherin Lemus
4. Guadalupe Lucero
5. Genesis Lucero
6. Nery Martinez
7. Kay Martinez

Thank you.

Regards,

Ken Liu
Research Director
Culinary Workers Union
UNITE HERE Local 226
Tel: 702-266-5620

**PUBLIC COMMENTS BY GEOCONDA ARGUELLO-KLINE
NEVADA GAMING CONTROL BOARD WORKSHOP ON COVID-19, MAY 26, 2020**

Good morning. My name is Geoconda Arguello-Kline. As the leader of Culinary Workers Union Local 226, I represent tens of thousands of casino workers in Nevada who will be made into frontline workers in the on-going fight against the COVID-19 pandemic, apparently very soon. This is a matter of life-or-death for workers, and I urge everyone to proceed very deliberately and very carefully.

Culinary Union members and other casino workers will become frontline workers because we are the ones who will interact with guests daily and frequently. Cocktail servers, food servers, guest room attendants, public area porters, bells, and many others will be in direct contact with guests. They will also be placed in a role where they will be responsible for helping to prevent the spread of COVID-19 by implementing enhanced cleaning and disinfection protocols as well as monitoring guest behavior with respect to social distancing. This work on the frontline will not be done by the billionaire owners, CEOs, CFOs, or hedge fund investors who are going to profit from these casinos.

To protect casino workers on the frontline against COVID-19, we need to give them all the tools they need and we are demanding the highest standard of public health and safety protections. Two things are crucial: One, transparency from casinos as to how they will prevent the spread of COVID-19; Two, we believe the Control Board should adopt our union's public health guidelines as the minimum standard for casino operations during the COVID-19 pandemic.

The public expectation now is that the Control Board will review and approve in secrecy hundreds of re-opening plans from gaming licensees in this coming week and let these casinos re-open sometime by June 4.

We all want to know how the Nevada Gaming Control Board will be making these life-or-death decisions for frontline casino employees. How will the Board review, evaluate, and approve these re-opening plans when the CDC, federal OSHA, state OSHA, or local health authorities have yet to provide concrete guidance on how to mitigate the risk of COVID-19 in casino resorts, which are massive, complex hospitality operations involving tens of thousands of employees and guests?

We have urged the Board to use our union's public health guidelines as a minimum standard for how casinos should operate during the COVID-19 pandemic. Many of our guidelines cover common sense practices such as frequent hand-washing, social distancing, providing adequate PPE to employees, and testing employees for COVID-19. There are some other elements that we believe are equally important. For example, we call for the daily cleaning of hotel guest rooms.

Again, this goes back to a choice between safety and profit. As reported in the Wall Street Journal last week, "scaling back on daily room visits in favor of deeper cleaning before guests arrive could allow hotel owners to reduce costs down the road." But what might be the cost to worker safety?¹

When we re-open the casinos, guests from all over the country, perhaps all over the world, will come. As we cannot adopt a 14-day quarantine requirement for in-bound visitors like the State of Hawaii has done, we do not know who might be a carrier of the novel coronavirus visiting us.

**PUBLIC COMMENTS BY GEOCONDA ARGUELLO-KLINE
NEVADA GAMING CONTROL BOARD WORKSHOP ON COVID-19, MAY 26, 2020**

We need to provide daily cleaning of guest rooms to ensure early and prompt detection of potential COVID-19 cases. What happens if someone who arrives in Vegas asymptomatic, develops symptoms here, and decides to hole up in their room for a couple of days instead of asking for medical attention?

In different ways, the World Health Organization², CalOSHA,³ and others⁴ have recommended daily cleaning of hotel guest rooms to prevent COVID-19. Four Seasons, a leading hotel operator with a long-established presence on the Las Vegas Strip, has even worked with experts from Johns Hopkins Medicine International to come up with a new health and safety program that calls for, among other things, daily disinfection of guest rooms.⁵

We have to get this right as we prepare to re-open casinos in Nevada. Let's make sure we take the time we need to take and consider carefully the many challenges we will need to confront together to welcome visitors back to Nevada.

Fifteen Culinary Union workers and their family members have died from COVID-19. We shouldn't lose any more fathers, mothers, sons, daughters, or other loved ones from this preventable disease.

¹ <https://www.wsj.com/articles/hotels-fund-more-cleaning-by-cutting-room-amenities-and-breakfast-buffets-11590183440>

² <https://apps.who.int/iris/handle/10665/331937> "Operational considerations for COVID-19 management in the accommodation sector. Interim guidance, 30 April, 2020"

³ <https://covid19.ca.gov/pdf/guidance-hotels.pdf> "COVID-19 INDUSTRY GUIDANCE: Hotels and Lodging, May 12, 2020"

⁴ <https://www.amadeus-hospitality.com/insight/enhance-hotel-cleaning-covid-19/> Amadeus Hospitality, "5 Steps to Enhancing Hotel Housekeeping & Guest Satisfaction in a Downturn"; <https://www.nea.gov.sg/docs/default-source/our-services/public-cleanliness/advisory-for-hotel-operators.pdf> Singapore National Environmental Agency, "Sanitation and Hygiene Advisory for Hotel Operators, 2/3/2020".

⁵ <https://press.fourseasons.com/news-releases/2020/lead-with-care-program/>

Hello, my name is Gladis Blanco, I am a guest room attendant at Bellagio on the Las Vegas Strip.

If gaming companies don't take the precautions they should today, how can workers know for sure if we will be safe when casinos reopen?

After October 1st, workers like me saw firsthand that unmonitored rooms are a matter of life and death. For safety reasons, guest rooms should be checked and serviced every day. We need to know what's going on with these rooms every day to make sure all of us are safe.

I have two children and a husband, and it's important to me that I stay healthy. I do not want to risk my families' life every time I come home by bringing the virus home to them.

My company, MGM Resorts International, needs to make their entire safety guidelines public. So far, they released a few pages, but the public should be able to see the entire plan. Transparency will protect us. It will protect the entire industry.

Having the same strong safety standard for every casino will make me feel safe when I go back to work.

To the NV Gaming Control Board/Commission: After October 1st: Don't gamble on safety. We have to check on guests and rooms every day. Please make sure that the companies keep their employees and our beautiful city safe. Workers' lives depend on it. My live and my families' livelihood is on the line.

Thank you.

Hi, my name is Katherin, and I am 17 years old. My mom is Gladis Blanco, and she is a guest room attendant at the Bellagio.

As much as I know that my mom needs to go back to work, there is a part of me that worries about her and other people I know who are going back to work on the Las Vegas Strip in housekeeping.

My mom's best friend works with her in housekeeping at Bellagio, and her other friend works at Caesars Palace in housekeeping - all of these people are important to me and my family. I'm worried about keeping everyone safe.

I am stressed because it's already hard for my mom being laid off. But I'm worried that it may be even more stressful for our family to go back to work, worrying about her kids, our home, and then being anxious about mom's health at work on top of everything.

I feel helpless that there is nothing I can do to help my mom. My hope is that my mom's company will find a way to make all the workers feel comfortable in their environment. The workers' voices matter because they are doing all of the work.

I know that the Nevada Gaming Commission is worried about cheating. I'm worried that the casinos will cheat with my mom's health and the safety of guests, if the companies aren't made to do the most to protect workers. Please make sure my mom's life is protected – I cannot imagine my life without her.

Thank you.

Good morning everyone my name is Guadalupe Lucero. I am a guest room attendant at Bally's Las Vegas Hotel & Casino and have been a member of the Culinary Union for 29 years.

My biggest concern, as casinos begin to reopen, is that I return back to work with strong protections. It is important that Caesars Entertainment work with my union so that my coworkers and I have the protections that we need to be safe at work and so that guests are protected.

I am at high risk for contracting COVID-19. I am 61-years-old. I have asthma, high blood pressure, and I am a type 2 diabetic – and that's why it is important that every casino company be transparent with the public about their safety protocols. We deserve to know all the safety details and we deserve to be protected as much as possible.

There should be daily servicing of all rooms so they are ventilated and checked daily. Housekeepers are often the first to catch maintenance and security issues – so it's essential someone is checking on hotel rooms every day and ensuring guests are safe. Cleaning during and post-COVID-19 means a lot more work for us guest room attendants and a higher workload. There need to be more workers to help us safely clean the rooms to the new necessary standard – our bodies and our lives are on the line.

I work really hard as a housekeeper. It is a very tough job but I'm proud of the work I do. With my good union job, I have been able to raise my four children with a good salary and the best health insurance. I hope that my company comes to an agreement with my union and that the NV Gaming Commission adopts stronger safety guidelines today so that we can feel safe when we return back to work.

Thank you.

Good morning everyone, my name is Genesis, I'm 27-years-old and I am the daughter of Guadalupe Lucero – she is a housekeeper at Bally's.

I am worried about my mom getting COVID-19 when she returns back to work.

Mom has been a guest room attendant all of my life. I'm so proud of the hard work my mom has done to take care of me and our family, but I worry that if mom's workplace isn't safe, then she will be at risk.

I feel scared because my mom is older and she has underlying health conditions that put her at risk for getting COVID-19. She is a very strong woman and has raised my siblings and I, we all look up to her, and we don't want her to get sick with coronavirus. I love my mom and if her workplace is not safe then I will be worried every day.

Nevada needs to enforce strict safety procedures and to make sure that the work environment is safe for workers like my mom to return back to work. The state should center worker's voices and adopt the safety standards proposed by the worker's union.

The company and this entire gaming/hospitality industry depends on workers, so it's important workers voices are heard and the environment is truly safe every worker – including my mom.

Hi, my name is Nery Martinez, and I am a bartender at Caesars Palace.

Safety is my top concern when we reopen our city. Employees like me need to be tested regularly when casinos reopen. As a bartender, I'm concerned about how I will handle cash safely, if I will have a new mask whenever I need one at work, and how I will be protected if guests don't want to wear a mask.

It's very important that everyone can see what casinos are doing to ensure safety at every property. The public should know what is going on. Each casino should post their full safety guidelines.

In my household, my mother-in-law (my children's grandmother) can get very sick if I bring COVID-19 home with me. I don't want to put any of my family members' health at risk. One step we can take is to make sure every single worker going back to work has to be mandatory tested for COVID-19 and tested regularly.

If the gaming industry won't take all of the precautions needed to keep my coworkers and I safe, they are making bets on who will get COVID-19. They are gambling with our lives. Casinos need to make sure they are doing everything they can to make sure workers and their families are safe and healthy.

To the NV Gaming Commission: I urge you to mandate a stronger uniform health and safety protocols immediately – include the Culinary Union's proposals, require each gaming company to post their detailed safety guidelines for the public to see, and require mandatory testing and regular COVID19 testing for every worker.

Thank you.

Hi my name is Katy and I am 17 years old. My dad is a bartender at Caesars Palace.

I am worried about my dad going back to work. He will be at high risk as he talks to many guests every day at a casino. I wonder: Will guests be required to wear a mask too? How will the casino enforce a rule that guests should wear a mask? It's scary to think about my dad going back to work, but at the same time, I know that it's necessary. It's important to me that my dad is safe.

I want my dad's boss to have his health and safety in mind, and not just money.

I want them to know that families like mine are at risk here. I want them to take more safety precautions to protect my parents and guests. I want to make sure that the companies test every worker regularly!

Thanks.

From: Ross Hoffman

Sent: Monday, May 25, 2020 10:56 PM

Subject: Nevada Gaming Control Board Public Comment - Tuesday May 26th Meeting - Poker Room Player Count

From Ross Hoffman.

I have seen discussion about limiting Nevada poker room tables to FOUR players as casinos start to reopen. As an experienced live poker player, I strongly recommend the maximum used be SIX players instead.

Four players is too few to attract the efforts of most casual poker players, and it will probably be difficult financially for the poker room operators. It will be very difficult to keep games going, as a simple restroom break by one or two players will leave the remaining players very "short handed". The strategy needed with only 4 players is also much more demanding, which will also put casual players off of participating.

I hope six players can still be done safely, and I guess that is the priority, but again four players is going to be a big challenge to maintain the rooms.

Thank you for your consideration.

Sincerely,

Ross Hoffman

From: Darryl Rosenblatt

Sent: Tuesday, May 26, 2020 3:39 AM

To: publiccomment; Jeff Smith; Richard Newman

Subject: To be read into the public record pursuant to NRS 241.020(2)(c)(3). May 26, 2020

Please see attached document.

Thank you for reading the attached document into the public record during the NGCB meeting on May 26, 2020.



To be read into the public record pursuant to NRS 241.020(2)(c)(3).

May 26, 2020

Honorable Chairwoman, Members of the Board, and Distinguished Speakers,

I hope this letter finds you in good health and spirits.

Our company Smith Rosen has developed a line of UVC solutions to mitigate the proliferation of bacteria and virus in a casino environment. I have been fortunate enough to have personally survived the coronavirus and emerge from the pandemic a stronger person than I was before it started.

Therefore, I feel it is incumbent on me, to share with you, some of the information we have gathered during the course of our product(s) development. It is my hope that this information may aid you in crafting an effective set of policies that will govern the reopening of our State's casinos.

The plethora of misinformation circulating throughout the gaming industry concerning the proliferation of Covid-19 can only be described as ridiculous.

I am writing you because I am generally concerned about the reopening plans submitted by the casinos, for your honorable board to review.

There need only be one global Health policy in place, for all the unrestricted license holders to adhere to, or the proposed health policies proffered by the integrated resorts, will serve as symbolism posing as function, and do nothing to keep people safe as they hop from property to property.

The similarities between the mathematical formulas that are used to determine probability in gaming are eerily similar to the algorithms used to predict the promulgation of disease.

Similar to the outcome of a gaming session, a person's chances of contracting a disease are aleatory, based on numerous factors, known and unknown. As random as these events may *appear* to be, we are able to discover and track constants over time, and then predict future outcomes through *math*.

One needs to look no further than the explosive growth of our industry as evidence of the reliability of gaming's many math models. Math has always been a casino's best friend.

Science has also played an enormous role in the development of new and innovative casino gaming technologies, and all of these technologies, *all of them*, work hand in hand with the *math*.

I think it is an incontrovertible fact that the *math* and *science* suggest it is a bad idea to open up gaming at this point in time.

It is equally obvious, that the continued closure of our resorts will result in an economic disaster that this state may *never* recover from.

With strict social distancing guidelines in place, it makes sense to begin to open our *local* bars and casinos.

However, our integrated resorts cater to guests from every corner of the country.

We simply have no measure to predict where people are going to come from when reopening, making contact tracing virtually impossible, so I would implore you to keep the following facts in mind:

Regardless of what social initiative mandates are put in place by the GCB, their efficacy will not be known for at *least* 4-6 weeks.

Vegas will attract many younger visitors from troubled states that are infected by Covid-19, and will present as asymptomatic, meaning that all the temperature scans in the world, will not prevent them from mingling with other guests.

We have also learned from media reports that millennials, over every other demographic, have demonstrated an almost irrational aversion to social distancing, - in particular wearing masks in public.

Joining the aforementioned millennials in the reopening, is the most coveted casino customer of all, the baby boomer, whom according to the math, *and* the *science*, are the most at risk for contracting covid-19, due to their age, and pre-existing conditions.

Station Casino's largest customer base is baby boomers, and the word "mask" appears absolutely *nowhere* in their reopening plan. There is no requirement of the guests to wear PPE, *whatsoever*.

Wynn also enjoys a large customer base of baby boomers, the Wynn reopening plan states,

"Employees are required and guests will be asked to wear appropriate masks or face coverings, which will be provided by the resort. At management's discretion guests may be allowed to remove their face covering when other safety protocols are available. Guests may be required to briefly lower face coverings for for identification purposes in compliance with regulatory and safety requirements."

The Wynn makes clear in their health report that they are following the guidelines suggested by the Center for Disease Control, which state clearly,

"[CDC](#) continues to study the spread and effects of the novel coronavirus across the United States. We now know from [recent studies](#) that a significant portion of individuals with coronavirus lack symptoms ("asymptomatic") and that even those who eventually develop symptoms ("pre-symptomatic") can transmit the virus to others before showing symptoms. This means that the virus can spread between people interacting in close proximity—for example, speaking, coughing, or sneezing—even if those

*people are not exhibiting symptoms. In light of this new evidence, CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) **especially** in areas of significant community-based transmission.”*

This disparity between Health Policies is very alarming, especially given the fact that Station Casinos caters almost *exclusively* to native Nevadans.

I can tell you after about nine hundred hours of research, there is absolutely nothing less expensive, and at the same time, more effective at reducing the spread of covid-19, than wearing a mask, or covering your mouth – Period.

The most effective order that the Gaming Control Board can issue to mitigate the proliferation of the covid-19 virus in Nevada Casinos, is to make it mandatory that every casino patron be issued a mask, and that mask be worn at all times in a casino, and failure to wear the mask, or removal of the mask, will result in that patron being immediately trespassed from the property.

Forcing guests to wear masks, a rigorous cleaning regimen, and the utilization of technologies that actively kill virus and bacteria in the hotel rooms, and on the casino floor are the keys to insuring the safety of *all* our guests.

In light of all the public information proffered by the CDC, any unrestricted gaming license holders that don't require their guests wear masks, may be exposed to a civil liability that will make the costs of masks seem insignificant in the long run, should a guest happen to contract the virus during their stay.

The industry has learned, *firsthand*, that when the most horrible things occur at an integrated resort, the property is held liable *regardless* of whether or not legal culpability actually exists.

Today, the Nevada Gaming control board is in a position to save *many, many* lives.

Make it mandatory that all casino employees and patrons wear masks, at all times, with the exception of restaurants, when they are in the public areas of the resort.

Nothing will bring more disrepute on the State of Nevada than for us to become the epicenter of the second wave of the coronavirus pandemic, especially if it can be so easily prevented.

Thank you for your audience.

Sincerely,

Darryl Rosenblatt.

Smith Rosen Gaming Partitions

From: Susan Lang

Sent: Tuesday, May 26, 2020 6:51 AM

Subject: SMOKING IN THE CASINOS

I would hope you are considering not allowing smoking for the phase one of the reopening of the casinos. Evidence is mounting that the act of exhaling smoke spreads the droplets into the air and are easily transmitted to other people. At some point when the pandemic scare passes, you can then allow it. I see no sense on all the social distancing, sanitizing machines and chips if the player 6 feet from me is blowing the contents of his lungs at me.

This is just common sense. Smoking must be banned on the casino floor. Speak to any health official. They would agree.

Susan Lang
Mesquite, NV

From: C. Kessel
Sent: Tuesday, May 26, 2020 8:15 AM
Subject: Covid-19 Update Meeting Agenda - 05/26/2020

To the Gaming Commission:

My name is Cathy Kessel and I love Las Vegas. I have had a business in this community for 10 years. However, I am deeply concerned about the opening of Las Vegas and the casinos at this point in time. Even though everyone has worked so hard to put processes and procedures in place inside the casinos, there is no way to control the insanity that will pour into our city and on the Las Vegas Strip by the masses of people who just want to get out of their houses and their closed cities (like Los Angeles) and come to "party" in Las Vegas. So many of my friends just can't wait to come to a place to party and they just want the casinos to be open "enough" so that they can do that. If they have to sleep in their cars or with other friends, they will. How will we control what happens once the city even opens up a little. Las Vegas is going to be swarmed with people, and there will be no social distancing, no masks, and no way to be safe from the people have the coronavirus and who doesn't.

Please consider keeping Las Vegas closed another month or until the rest of the country gets open enough and we know that our community will be save from everyone coming here and possibly infecting our community, just because we do say "what happens in Vegas stays in Vegas". We don't need people to bring their infection to our community and leave it here for us to get sick and die.

Thank you for your consideration,

Cathy Kessel

From: Ash Mirchandani

Sent: Tuesday, May 26, 2020 9:14 AM

Subject: Public Comment - GCB Tuesday, May 26th Meeting.

Good Morning, As a small businessman, a community healthcare provider, and a concerned citizen, I would like to urge the GCB to focus on the following;

1. Safety of all visitors, vendors and small businesses serving the gaming Industry.
2. In case of a resurgence of COVID 19 cases what is our plan to immediately put measures in place to quarantine the resurgence. Do we have a disaster preparedness plan for COVID19?
3. How are we putting our visitors at ease by informing them of our quality of care and resources available in the unfortunate event that they need it. Are there going to be mobile medical units posted around the strip?

Sincerely,

ASH MIRCHANDANI
MANAGING PRINCIPAL
M GROUP

4485 South Buffalo Drive Las Vegas NV 89147

P 702-280-7203 | F 702-933-1041 WWW.MBGHOLDINGS.COM

From: Dan Doud

Sent: Tuesday, 26 May 2020 11:57:44 (UTC-08:00) Pacific Time (US & Canada)

To: Ducharme, Holly

Cc: publiccomment; GCB Research; Bell, Marie; Barbee, Jim

Subject: Casino and Convention Center Covid Screening Options

Dear Gaming Commission Board,

If all goes well, I understand Casinos and some businesses will be opening June 1. Congrats. It has been a battle. Hope we can all get this behind us.

I also understand Nevada Gaming Commission and Department of Health plan to individually test Casino employees for the Covid virus when operations reopen. Question: Why are the employees being monitored but not the customers and patrons? They are more likely to expose the employees than vice versa. Their health is equally important.

There are options to unobtrusively test employees AND the gamblers, diners, drivers, valet, administrator, security, police and anyone else coming in or near the casino. This can be done without human involvement or risk to their health and for the same low cost.

Ioticiti is a revolutionary Covid 19 Thermal Monitoring Platform which helps preserve the health, wellness and safety of employees, customers, management and other service employees.

Employee monitoring: Ioticiti's Artificial Intelligence platform monitors the employees thermal temperature throughout the day without interfering with their workflow.

Customer monitoring: 200+ customers/minute can be easily and discretely scanned for thermal temperature upon entry to ensure their state of health while still preserving their privacy. If you are testing employees it costs nothing more to test the customers.

Social distancing: Guidelines for the health and safety of the public in casino's restaurants will be changing and making adjustments to protocols as we all re-emerge from this global pause and re-evaluation. Ioticiti technology provides a level of assurance to employees, customers and the general public that should help persuade the Department of Public Health to allow more reasonable seating which rely upon a certain occupancy and table turn over in order to meet necessary profits.

Public Assurance: Coming out of this great global pause, we all must figure out how to re-emerge with new conscious and sustainable business models that up-level the above areas of concern and provide a sense of safety to the public.

I look forward to hearing back from you on whom I should be discussing our services with.

Sincerely,

Dan Doud
949-500-5415



Ioticiti Networks Inc.

www.ioticiti.com

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From: S R

Sent: Tuesday, 26 May 2020 12:20:31 (UTC-08:00) Pacific Time (US & Canada)

Subject: Nevada GCB Workshop Public Comment

Hello Nevada GCB,

Please maintain public safety as the top priority as you consider re-opening. If local residents and employees become sick or a resurgent spike of COVID-19 occurs due to re-opening too quickly or without the highest precautions, then there may be a greater impact if a second shutdown is required. Your constituents will be impacted the most and they are the life-blood of the local business and economic operations. Please review the recent news on the opening in Lake of the Ozarks, MO. Social distancing rules were blatantly disregarded and went unenforced, which could be a possibility here if out-of-towners surge back to Las Vegas. Please follow the Emergency Management and Health Care professionals' expert advice.

Thanks you for your work and consideration,

Spencer Rowe
Las Vegas

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